

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1100	1 1 1
OMB AP	PROVAL'
OMB Number:	3235-0076
Expires:	May 31, 2002
Estimated average	
hours per respo	nse 16.00

SEC USE ONLY						
Prefix	Serial					
DATE R	CEIVED					

	nis is an amendment and name has changed, and indic	cate change.)	
Stonestreet One, Inc. Private Pla Filing Under (Check box(es) that a		I Section 4(6) ☐ ULOE	<u> </u>
	Ppriy): □ Raic 304 □ Raic 303 ☑ Raic 300 □ □ Amendment	1 Section 4(0) LI OLOL	
Type of times. Zartew times	A. BASIC IDENTIFICATION DAT	r A	
1. Enter the information requested		IA	1 (1947) 11 (1941) 11 (1941) 11 (1941) 11 (1941) 11 (1941) 11 (1941) 11 (1941) 11 (1941) 11 (1941) 11 (1941)
	is an amendment and name has changed, and indicate	change.)	
Stonestreet One, Inc.	and the same same same same same same same sam	g/	07079553
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number	01012200
322 West Main Street, Louisville	, KY 40202	502-595-7000	
Address of Principal Business Ope (if different from Executive Office		Telephone Number (In	cluding Area Code)
Brief Description of Business Desi	gn, develop and integrate wireless and embedded	technology solutions	PROCESSED
Type of Business Organization			On OCT 1 1 2007
□ corporation	limited partnership, already formed	☐ other (please specify	THOMSON
☐ business trust	☐ limited partnership, to be formed	U office (piease specify	FINANCIAL
Actual or Estimated Date of Incorp		☑ Actual ☐ Estimated	• •
Jurisdiction of Incorporation or Or	ganization: (Enter two-letter U.S. Postal Service abbro CN for Canada: FN for other foreign juri		KIY
Jurisdiction of Incorporation or Or GENERAL INSTRUCTIONS	ganization: (Enter two-letter U.S. Postal Service abbro CN for Canada; FN for other foreign juri		KY

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offer-ing, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemp-tion, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - · Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Smith, Richard W.	f individual)				
Business or Residence Addre 322 West Main Street, Lou		-	Code)		·
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer		☐ General and/or Managing Partner
Full Name (Last name first, i Reilly, Timothy A.	f individual)				
Business or Residence Address 322 West Main Street, Lou	•		Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, i McChesney, Thomas E.	f individual)				
Business or Residence Addre 1928 NE 26 th Ave., Portland		d Street, City, State, Zip (Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Manry, John P.	f individual)				
Business or Residence Addre 17529 Paradise Cove Cour	,		Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Stich, John M.	f individual)				
Business or Residence Address 5819 Edinburgh Street, Da	-	d Street, City, State, Zip (Code)		
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Su, Ambrose K.	f individual)				
Business or Residence Addre 2408 NE Division, Bend, O		d Street, City, State, Zip (Code)		

					B. I	NFORMA	TION ABO	OUT OFF	ERING						
														Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						\boxtimes									
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?							\$ \$30	0,000							
2		5 1110 11111		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	····· oc acce	pica mom	any marria		•••••••	••••••				-	No
3. Do	es t	he offerii	ng permit jo	int ownersh	ip of a sing	le unit?							•••••		
or list of	sim ted i the	ilar remu s an asso broker o	neration for sciated person dealer. If	r solicitation on or agent	n of purcha of a broker live (5) per	sers in co or dealer sons to be	en or will be nnection wi registered we listed are a	th sales of ith the SE	securities in Se	in the offer ith a state o	ring. If a or states, I	perso list th	on to be ne name	: !	
		(Last nan Securiti	ne first, if ir	dividual)									<u>.</u>		
				(Number ar		-	Zip Code)								
Name o	of A	ssociated	Broker or I	Dealer											
States i	n W	hich Pers	son Listed H	las Solicited	l or Intends	to Solicit	Purchasers	<u> </u>							
(Chec	k "A	Il States	" or check i	ndividual St	ates)					••••••		• • • • • • • •		□ All	States
(AL)		[AK]	[AZ]	(AR)	[CA] X		[CT]	[DE]	[DC]	[FL]	[GA]		[HI]	[ID	
[IL] [MT]	Х	[IN]	[IA]	(KS)	[KY]	(LA)	[ME]	[MD]	(MA)	[MI]	[MN] [OK]	Х	[MS]	OM]	
[RI]		[NE] [SC]	[NV] [SD]	[NH] [TN] X	[NJ] [TX]	[MM] [UT]	[NY] X [VT]	[NC] [VA]	(ND) (WA) X	[HO] [VW]	[WI]	Х	[OR] [WY]	X [PA [PR	-
Busine	ss or	Residen	ce Address	(Number ar	d Street, C	ity, State,	Zip Code)								
Name o	of A	ssociated	Broker or I	Dealer											
States i	n W	hich Per	son Listed F	las Solicited	l or Intends	to Solicit	Purchasers								
(Chec	k "A	All States	" or check i	ndividual St	ates)	•••••	•••••			•••••		•••••		. □ All	States
[AL]		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]		[HI]	[ID	-
[IL] [MT]		[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	(ME) [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] (OK)		[MS] [OR]	[MO [PA	
[RI]		[SC]	(SD)	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]		[WY]	(PR	
Full Na	me	(Last nan	ne first, if is	ndividual)			_								
Busine	SS OI	Residen	ice Address	(Number ar	d Street, C	ity, State,	Zip Code)								_
															
Name o	of A	ssociated	Broker or l	Dealer											
States i	n W	hich Per	son Listed I	łas Solicited	l or Intends	to Solicit	Purchasers								
(Chec	k "A	All States	" or check i	ndividual Si	ates)						•••••		•••••	. □ All	States
[AL]		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]		[HI]	(ID	
[IL]		(IN)	[IA]	[KS]	[KY]	[LA]	(ME)	[MD]	[MA]	[MI]	[MN]		[MS]	OM]	
(MT) (RI)		[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[YY] [TV]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]		[OR] [WY]	[PA [PR	
[T/T]		[00]	زددا	[T ta]	[TV]	[01]	[A T]	[ALT]	[417.7]	[11.4]	f + 1		r 1	1 - 1/	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PRO	OCEEDS			
1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
Type of Security		Aggregate ffering Price	A	\m(ount Already Sold
Debt	\$_		\$	<u> </u>	
Equity	\$	4,950,000	9	<u></u>	(
☑ Common □ Preferred					
Convertible Securities (including warrants)	\$_	0	9	<u> </u>	(
Partnership Interests	\$_	0	5	<u> </u>	(
Other (Specify)	\$_	0	5	<u> </u>	(
Total			5	§	
Answer also in Appendix, Column 3, if filing under ULOE.					
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number Investors		D	Aggregate ollar Amoun of Purchases
Accredited Investors		1	•	\$	300,000
Non-accredited Investors	_	0		 §	N/A
Total (for filings under Rule 504 only)	_			\$ \$	
Answer also in Appendix, Column 4, if filing under ULOE.	-	13//4		"	N/A
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.					
Type of Security		Type of Security		Do	llar Amount Sold
Rule 505		N/A	9	\$	N/A
Regulation A	_	N/A		- S	N/A
Rule 504	-	N/A	9	- S	N/A
Total	-	N/A	•	* \$	N/A
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
Transfer Agent's Fees			5	S	N/A
Printing and Engraving Costs			5	s_	\$2,500
Legal Fees			5	<u></u>	15,000
Accounting Fees			9	s <u> </u>	N/A
Engineering Fees			9	\$	N/A

447,500 20,000

485,000

Sales Commissions (specify finders' fees separately).....

Other Expenses (identify) Travel, Miscellaneous

b. Enter the difference between the aggregate	offering price given in response to Part C -	Oiles-			
tion 1 and total expenses furnished in response "adjusted gross proceeds to the issuer."	e to Part C - Question 4.a. This difference	is the		\$_	4,465,000
5. Indicate below the amount of the adjusted groused for each of the purposes shown. If the amou and check the box to the left of the estimate. The gross proceeds to the issuer set forth in response	int for any purpose is not known, furnish an est total of the payments listed must equal the ad	imate	*. *		
S. 656 P. 666-65 TO THE FORM THE FORM THE FORM			Payments to		
			Officers,	-	
	· ·		Directors, & Affiliates		Payments To Others
Salaries and fees			0		0
Purchase of real estate		□ \$_	0	\$_	0
Purchase, rental or leasing and installation of	machinery and equipment	□ \$_	0	□\$_	0
Construction or leasing of plant buildings and	facilities	□ \$_	0	_ s_	0
Acquisition of other businesses (including the					
offering that may be used in exchange for the to a merger)	assets or securities of another issuer pursuant	□ \$_	0		0
Repayment of indebtedness		□ \$_	´ 0	_ s	0
Working capital		□ \$_	0	⊠\$_	4,465,000
Other (specify):		□\$_	0 .	□ \$ _	
•		- ¢	0	.	
Column Totals		□ •	0	.⊔3_	
		•		_	4,465,000
Total Payments Listed (column totals added)			⊠ \$ <u>4</u>	,465,00	0
	D. FEDERAL SIGNATURE		· · · · · · · · · · · · · · · · · · · 		-
					D 1 604 1
The issuer has duly caused this notice to be singed following signature constitutes an undertaking by the its staff, the information furnished by the issuer to any	issuer to furnish to the U.S. Securities and Ex-	change	Commission, u		
Issuer (Print or Type)	Signature		Date		
Stonestreet One, Inc.	Busard W Smith		10/2/	1200	7
Name of Signer (Print or Type)	Title of Signer (Print or Type)				
Richard W. Smith	President				

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

 $\mathbb{E}\mathbb{N}\mathbb{D}$

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)